## PART B - FEE(S) TRANSMITTAL

blete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUCommissioner for P.O. Box 1450

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (571)-273-2885

reland	s of the panying g, must  United nvelope acsimile  r's name)
Fee(s) Transmittal. This certificate cannot be used for any other accompany papers. Each additional papers, such as an assignment or formal drawing, have its own certificate of mailing or transmission.  RATNERPRESTIA P O BOX 980 VALLEY FORGE, PA 19482-0980  7/25/2006 FFANAIA3 00000042 10542819  I FC:1501 I 1400.00 0P FC:1504 I 300.00 0P FC:1504 I 5F:8001 APPLICATION NO. FILING DATE FIRST NAMED INVENTOR  APPLICATION: METHANOL SYNTHESIS  APPLIN TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE FORMING FARSA, JAFAR F IG21 S18-706000  EXAMINER ART UNIT CLASS-SUBCLASS PARSA, JAFAR F IG21 S18-706000  Change of correspondence address or indication of "Fee Address" (37) Change of correspondence address or indication of "Fee Address" (37) TFR 1,303).  Change of correspondence address or indication of "Fee Address" (37) Change of correspondence address or indication of "Fee Address" (37) TFR 1,303).  Change of correspondence address or indication of "Fee Address" (37) TFR 1,303).  ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been file recoordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)	United nvelope acsimile
RATNERPRESTIA P O BOX 980 VALLEY FORGE, PA 19482-0980 VALE	United nvelope acsimile r's name)
RATNERPRESTIA P O BOX 980 VALLEY FORGE, PA 19482-0980  7/25/2006 FFANAIA3 0000042 10542819  Leci 1501 1400.00 0P 2 FC:1504 300.00 0P 3 FC:8001 3 0.00 0P 3 DC:SCETTO (ST) 273-2885, on the date indicate below. The date indicated below. The date i	r's name) ignature)
VALLEY FORGE, PA 19482-0980  Itansmitted to the USPTO (371) 273-2883, on the date indicated below. Transmitted to the USPTO (371) 273-2883, on the date indicated below. Transmitted to the USPTO (371) 273-2883, on the date indicated below. Transmitted to the USPTO (371) 273-2883, on the date indicated below. Transmitted to the USPTO (371) 273-2883, on the date indicated below. Transmitted to the USPTO (371) 273-2883, on the date indicated below. Transmitted to the USPTO (371) 273-2883, on the date indicated below. Transmitted to the USPTO (371) 273-2883, on the date indicated below. Transmitted to the USPTO (371) 273-2883, on the date indicated below. Transmitted to the USPTO (371) 273-2883, on the date indicated below. Transmitted to the USPTO (371) 273-2883, on the date indicated below. Transmitted to the USPTO (371) 273-2883, on the date indicated below. Transmitted to the USPTO (371) 273-2883, on the date indicated below. Transmitted to the USPTO (371) 273-2883, on the date indicated below. Transmitted to the USPTO (371) 273-2883, on the date indicated below. Transmitted to the USPTO (371) 273-2883, on the date indicated below. Transmitted to the USPTO (371) 273-2883, on the date indicated below. Transmitted to the USPTO (371) 273-2883, on the date indicated below. Transmitted to the USPTO (371) 273-2883, on the date indicated below. Transmitted to the USPTO (371) 273-2883, on the date indicated below. Transmitted to the USPTO (371) 273-2883, on the date indicated below. Transmitted to the USPTO (371) 273-2883, on the date indicated below. Transmitted to the USPTO (371) 273-2883, on the date indicated below. Transmitted to the USPTO (371) 273-2883, on the date indicated below. Transmitted to the USPTO (371) 273-2883, on the date indicated below. Transmitted to the USPTO (371) 273-2883, on the date indicated below. Transmitted to the USPTO (371) 273-2883, on the date indicated to USPTO (371) 273-2883, on the date indicated to USPTO (371) 273-2883, on the date indicated to USPTO (371) 273-2883, on the date ind	r's name) ignature)
FE:1501	ignature)
APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/542,819 07/20/2005 Terence James Fitzpatrick JMYS-132US 9557  APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1400 \$300 \$1700 09/20/2006  EXAMINER ART UNIT CLASS-SUBCLASS  PARSA, JAFAR F 1621 518-706000  Change of correspondence address or indication of "Fee Address" (37 IPR 1.363).  Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached.  Tee Address indication (or "Fee Address" Indication form Number is required.  ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been file recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE (B) RESIDENCE: CCITY and STATE OR COUNTRY)	
APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/542,819 07/20/2005 Terence James Fitzpatrick JMYS-132US 9557  APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1400 \$300 \$1700 09/20/2006  EXAMINER ART UNIT CLASS-SUBCLASS  PARSA, JAFAR F 1621 518-706000  Change of correspondence address or indication of "Fee Address" (37 IPR 1.363).  Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached.  Tee Address indication (or "Fee Address" Indication form Number is required.  ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been file recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE (B) RESIDENCE: CCITY and STATE OR COUNTRY)	(Data)
TITLE OF INVENTION: METHANOL SYNTHESIS  APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE  nonprovisional NO \$1400 \$300 \$1700 09/20/2006  EXAMINER ART UNIT CLASS-SUBCLASS  PARSA, JAFAR F 1621 518-706000  Change of correspondence address or indication of "Fee Address" (37 FR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  Tee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been file recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)	(Date)
APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE  nonprovisional NO \$1400 \$300 \$1700 09/20/2006  EXAMINER ART UNIT CLASS-SUBCLASS  PARSA, JAFAR F 1621 518-706000  Change of correspondence address or indication of "Fee Address" (37 Clange of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  ———————————————————————————————————	NO.
nonprovisional NO \$1400 \$300 \$1700 09/20/2006  EXAMINER ART UNIT CLASS-SUBCLASS  PARSA, JAFAR F 1621 518-706000  Change of correspondence address or indication of "Fee Address" (37 FR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignce is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been file recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)	
EXAMINER  ART UNIT  CLASS-SUBCLASS  PARSA, JAFAR F  1621  518-706000  Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (B) RESIDENCE: (CITY and STATE OR COUNTRY)	
PARSA, JAFAR F  1621  518-706000  Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (B) RESIDENCE: (CITY and STATE OR COUNTRY)	
Change of correspondence address or indication of "Fee Address" (37 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  The change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  The change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  The change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  The change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  (2) the name of a single firm (having as a member a registered attorney or agents) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  Change of correspondence address (or Change of Correspondence address (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered patent attorneys or agents OR, alternatively,  (3) the names of up to 3 registered patent attorneys or agents OR.  (4) the names of up to 3 registered patent attorneys or agents OR.  (5) the name of a single firm (having as a member a registered patent attorneys or agents OR.  (6) the names of up to 3 registered patent attorneys or agents OR.  (8) RESIDENCE: (CITY and STATE OR COUNTRY)	
2. For printing on the patent front page, list CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  Text Face Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been file recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, or agents OR, altern	
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  The control of the correspondence address (or Change of Correspondence Address form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)	
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been file recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)	
PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been file recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)	
recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)	
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)	iled for
Johnson Matthey PLC London, United Kingdom	
Please check the appropriate assignce category or categories (will not be printed on the patent):	rnment
a. The following fee(s) are enclosed:  4b. Payment of Fee(s):	
Sissue Fee	
<ul> <li>☑ Publication Fee (No small entity discount permitted)</li> <li>☑ Payment by credit card. Form PTO-2038 is attached.</li> <li>☑ Advance Order - # of Copies</li> <li>I O</li> <li>☑ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to</li> </ul>	t to
Advance Order - # of Copies 10 The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 18-0350 (enclose an extra copy of this form).	
. Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).	
The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.  NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other parameters as shown by the records of the United States Patent and Trademark Office.	e. party in
701v 20 2006	
Authorized Signature Date Sury 20, 2008  Typed or printed name Christopher R. Lewis Registration No. 36,201	
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to pro-	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTO/SB/21 (09-04) (AW 10/2004)

Approved for use through 7/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission 4

Application Number	10/542,819	
Filing Date	July 20, 2005	
First Named Inventor	Terence James Fitzpatrick	
Art Unit	1621	
Examiner Name	Jafar F. Parsa	
Attorney Docket No.	JMYS-132US	

ENCLOSURES (Check all that apply)					
Fee Transmittal Form Fee Attached	Drawing(s)     Licensing-related Papers	After Allowance Communication to TC			
Amendment/Reply After Final Affidavits/Declaration(s)  Extension of Time Request  Express Abandonment Request  Information Disclosure Statement  Certified Copy of Priority Document(s)  Response to Missing Parts/ Incomplete Application  Response to Missing Parts	☐ Petition       Appeal Communication to Boo of Appeals and Interferences         ☐ Petition to Convert to a Provisional Application       Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)         ☐ Power of Attorney, Revocation, Change of Correspondence Address       ☐ Proprietary Information         ☐ Terminal Disclaimer       ☐ Other Enclosure(s) (please identify below):         ☐ Request for Refund       Issue Fee/Publication Fee Transmitt (in duplicate)         ☐ Landscape Table on CD       PTO-2038         Return Receipt Postcard				
under 37 CFR 1.52 or 1.53 Remarks:					
SIGNATURE OF APPLICANT, ATTORNEY OR AGENT					
Firm Name RatnerPrestia Signature					
Printed Name Christopher R. Lewis					
Date July 20, 2006	Registration No. 36,201				
CERTIFICATE OF TRANSMISSION / MAILING					
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.Q. Box 1450, Alexandria, VA 22313-1450 on the date shown below:					
Signature Signature					
Typed or Printed Name Lisa Bennett Date July 20, 2006					

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Office, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, ALEXANDRIA, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.